

APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type::	REGULAR
Subject Matter::	UTILITY
CD-ROM or CD-R?::	NONE
Title::	COMPUTERIZED PROTECTION SYSTEM AND METHOD FOR AUTOMATICALLY IDENTIFYING AND/OR CHARACTERIZING RISK PARAMETERS
Attorney Docket Number::	297169US28PCT
Total Drawing Sheets::	5

INVENTOR INFORMATION

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Canada
Status::	FULL CAPACITY
Given Name::	Dieter
Middle Name::	S.
Family Name::	GAUBATZ
City of Residence::	Fort Wayne
State or Province of Residence::	Indiana
Country of Residence::	United States of America
Street of Mailing Address::	3024 Emerald Lake Drive
City of Mailing Address::	Fort Wayne
State or Province of Mailing Address::	Indiana
Country of Mailing Address::	United States of America
Postal or Zip Code of Mailing Address::	46804

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: United States of America
Status:: FULL CAPACITY
Given Name:: Edward
Middle Name:: J.
Family Name:: WRIGHT
City of Residence:: Fort Wayne
State or Province of Residence:: Indiana
Country of Residence:: United States of America
Street of Mailing Address:: Currie Hill Street
City of Mailing Address:: Fort Wayne
State or Province of Mailing Address:: Indiana
Country of Mailing Address:: United States of America
Postal or Zip Code of Mailing Address:: 46804

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: United States of America
Status:: FULL CAPACITY
Given Name:: Tracy
Middle Name:: A.
Family Name:: CHOKA
City of Residence:: Fort Wayne
State or Province of Residence:: Indiana
Country of Residence:: United States of America
Street of Mailing Address:: 1220 Korte Lane
City of Mailing Address:: Fort Wayne
State or Province of Mailing Address:: Indiana
Country of Mailing Address:: United States of America
Postal or Zip Code of Mailing Address:: 46807

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: United States of America
Status:: FULL CAPACITY
Given Name:: James
Middle Name:: P.
Family Name:: EUBANKS
City of Residence:: Fort Wayne
State or Province of Residence:: Indiana
Country of Residence:: United States of America
Street of Mailing Address:: 2022 Ardmore Road, Apt. 104
City of Mailing Address:: Fort Wayne
State or Province of Mailing Address:: Indiana
Country of Mailing Address:: United States of America
Postal or Zip Code of Mailing Address:: 46802

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/EP04/051830	08/18/04
PCT/EP04/051830	Continuation-in-Part	10/816,120	04/01/04

FOREIGN PRIORITY INFORMATION

ASSIGNMENT INFORMATION

Assignee Name:: Swiss Reinsurance Company
Street of Mailing Address:: Mythenquai 60
City of Mailing Address:: Zuerich
Country of Mailing Address:: Switzerland
Postal or Zip Code of Mailing Address:: CH-8022